

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

DeFazio for Congress

ADDRESS (number and street)

PO Box 1316

Check if different than previously reported. (ACC)

Springfield

OR

97477

2. FEC IDENTIFICATION NUMBER ▼

C C00215905

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

OR

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on 05 / 20 / 2014 in the State of OR

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

04 / 01 / 2014

through

04 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert Ackerman

Signature of Treasurer Robert Ackerman

[Electronically Filed]

Date

07 / 25 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
DeFazio for Congress

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	62509.34	600472.99
(b) Total Contribution Refunds (from Line 20(d))	400.00	400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	62109.34	600072.99
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	21410.29	312530.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	280.96	29939.52
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	21129.33	282591.31
8. Cash on Hand at Close of Reporting Period (from Line 27).....	476286.85	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

DeFazio for Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	30953.00	151535.00
(ii) Unitemized.....	3981.34	110799.09
(iii) TOTAL of contributions from individuals ▶	34934.34	262334.09
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	27575.00	338138.90
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	62509.34	600472.99
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	280.96	29939.52
15. OTHER RECEIPTS (Dividends, Interest, etc.)	86.48	934.76
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	62876.78	631347.27

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	21410.29	312530.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	400.00	400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	400.00	400.00
21. OTHER DISBURSEMENTS	1000.00	19520.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	22810.29	332450.83

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	436220.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	62876.78
25. SUBTOTAL (add Line 23 and Line 24).....	499097.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	22810.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	476286.85

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Stephen L Carter		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 3514 W 25th Ave		Transaction ID : C8808543
City Eugene	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Northwest Hardwoods	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Joseph J Cologne		Date of Receipt M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 2211 Division St		Transaction ID : C8765117
City Melrose Park	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 220.00	

Full Name (Last, First, Middle Initial) C. Lauren G Dunn		Date of Receipt M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 971 S 71st St		Transaction ID : C8806595
City Springfield	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Peace Health	Occupation Software Developer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

SUBTOTAL of Receipts This Page (optional).....	1220.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 54
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Kent H Duysen

Mailing Address 11426 Road 244

City Porterville State CA Zip Code 93257-9406

FEC ID number of contributing federal political committee. **C**

Name of Employer Sierra Forest Products Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : C8808545

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
A A Emmerson

Mailing Address PO Box 496028

City Redding State CA Zip Code 96049-6028

FEC ID number of contributing federal political committee. **C**

Name of Employer Sierra Pacific Industries Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : C8809776

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
Michael Fahey

Mailing Address 17219 SE 36th St

City Vancouver State WA Zip Code 98683-9465

FEC ID number of contributing federal political committee. **C**

Name of Employer Columbia Helicopters Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : C8810888

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Allyn C. Ford		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2014	
Mailing Address PO Box 1088		Transaction ID : C8808533	
City Roseburg	State OR	Zip Code 97470-0252	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Roseburg Forest Products	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) B. Rob Freres		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2014	
Mailing Address PO Box 276		Transaction ID : C8808526	
City Lyons	State OR	Zip Code 97358-0276	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Freres Lumber Co.	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) C. Thomas Insko		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2014	
Mailing Address 12 Pine Crest Dr		Transaction ID : C8808563	
City La Grande	State OR	Zip Code 97850-1300	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Boise Cascade	Occupation Region Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	5600.00
TOTAL This Period (last page this line number only).....	5600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Elizabeth L McGreer

Mailing Address 1341 Highland Ave

City Clarkston State WA Zip Code 99403-2961

FEC ID number of contributing federal political committee. **C**

Name of Employer McGreer & Company Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : C8808555

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
John R Murphy

Mailing Address 3993 Spring Blvd

City Eugene State OR Zip Code 97405-4491

FEC ID number of contributing federal political committee. **C**

Name of Employer Murphy Company Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : C8808535

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
James L Orr

Mailing Address 7502 Lakewood Dr W Ste D2

City Lakewood State WA Zip Code 98499-8410

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : C8809895

Amount of Each Receipt this Period
 2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Rosanna W Orr

Mailing Address 7502 Lakewood Dr W
Ste D2

City Lakewood State WA Zip Code 98499-8410

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : C8809897

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Lincoln Phillippi

Mailing Address 477 Ridgecrest Dr

City Grants Pass State OR Zip Code 97527-7121

FEC ID number of contributing federal political committee. **C**

Name of Employer Rough & Ready Lumber Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : C8808561

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Robert E. Ragon

Mailing Address 385 Westview Dr

City Roseburg State OR Zip Code 97471-9579

FEC ID number of contributing federal political committee. **C**

Name of Employer Douglas Timber Operators Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : C8808538

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Cheryl Ramberg-Ford

Mailing Address 1600 Moorea Dr

City Roseburg State OR Zip Code 97471-5594

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : C8808531

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Frank A Schmidbauer

Mailing Address PO Box 131

City Weaverville State CA Zip Code 96093-0131

FEC ID number of contributing federal political committee. **C**

Name of Employer Trinity River Lumber Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : C8808547

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Richard F Sohn

Mailing Address 62 N River Dr

City Roseburg State OR Zip Code 97470-9473

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : C8808527

Amount of Each Receipt this Period
 2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Steven D. Swanson

Mailing Address 1068 SE Belle Aire Dr

City Grants Pass State OR Zip Code 97526-3241

FEC ID number of contributing federal political committee. **C**

Name of Employer Superior Lumber Co. Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : C8808529

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
Southport Forest Products, LLC

Mailing Address PO Box 298

City Coos Bay State OR Zip Code 97420-0031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : C8811413

Amount of Each Receipt this Period
 1000.00

PARTNERSHIP--partners below if itemized

C. Full Name (Last, First, Middle Initial)
James Lyons

Mailing Address 508 Isabelle St

City North Bend State OR Zip Code 97459-3674

FEC ID number of contributing federal political committee. **C**

Name of Employer Southport Forest Products, LLC Occupation Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : C8860374

Amount of Each Receipt this Period
 500.00

[MEMO ITEM]
*

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Jason Smith

Mailing Address **PO Box 298**

City **Coos Bay** State **OR** Zip Code **97420-0031**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Southport Forest Products, LLC** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : C8812711

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Joyce C Abrams

Mailing Address **5489 Takilma Road**
Cave Junction

City **Cave Junction** State **OR** Zip Code **97523-9728**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self** Occupation **rancher/writer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **224.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 01 / 2014

Transaction ID : C8779345A

Amount of Each Receipt this Period
35.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4158.34**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : C8779345AB

Amount of Each Receipt this Period
35.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

35.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Patrick Ameen

Mailing Address 1638 Manley Rd

City West Chester State PA Zip Code 19380-6630

FEC ID number of contributing federal political committee. **C**

Name of Employer Amsted Rail Company, Inc. Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : C8764091A

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4158.34

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 04 / 2014

Transaction ID : C8764091AB

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Kent Anderson

Mailing Address 888 W Park St

City Eugene State OR Zip Code 97401-2929

FEC ID number of contributing federal political committee. **C**

Name of Employer Kent Anderson Law Office Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
223.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2014

Transaction ID : C8764103A

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4158.34

Date of Receipt
 M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : C8764103AB

Amount of Each Receipt this Period

50.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Kent Anderson

Mailing Address **888 W Park St**

City **Eugene** State **OR** Zip Code **97401-2929**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Kent Anderson Law Office** Occupation **Lawyer**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
223.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C8764104A

Amount of Each Receipt this Period

10.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4158.34

Date of Receipt
 M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : C8764104AB

Amount of Each Receipt this Period

10.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Philip N Barnhart

Mailing Address 2248 Potter St

City Eugene State OR Zip Code 97405-3066

FEC ID number of contributing federal political committee. **C**

Name of Employer State of Oregon Occupation Oregon State Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : C8764097A

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4158.34

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 04 / 2014

Transaction ID : C8764097AB

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Nicholas Calio

Mailing Address 1301 Pennsylvania Ave NW Ste 1100

City Washington State DC Zip Code 20004-1738

FEC ID number of contributing federal political committee. **C**

Name of Employer Airlines for America Occupation President and CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 10 / 2014

Transaction ID : C8799657A

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4158.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	4

Transaction ID : C8799657AB

Amount of Each Receipt this Period

500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Richard DeFrez

Mailing Address **4829 Quines Creek Road**

City **Azalea** State **OR** Zip Code **97410**

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____
Met One Instruments Senior Scientist

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

Transaction ID : C8764110A

Amount of Each Receipt this Period

25.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4158.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	4

Transaction ID : C8764110AB

Amount of Each Receipt this Period

25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

25.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Barbara Dodrill

Mailing Address **PO Box 432**

City **Bandon** State **OR** Zip Code **97411-0432**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 02 / 2014

Transaction ID : C8779349A

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4158.34**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : C8779349AB

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Don E Dumond

Mailing Address **1744 Moss St**

City **Eugene** State **OR** Zip Code **97403-1945**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C8764112A

Amount of Each Receipt this Period
15.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

65.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4158.34

Date of Receipt
 M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : C8764112AB

Amount of Each Receipt this Period
15.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Pamela A Earle

Mailing Address **1658 Frontier Dr
Apt 406**

City **Melbourne** State **FL** Zip Code **32940-6751**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lets Link Inc. LLC **Self Employed Consultant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : C8764095A

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4158.34

Date of Receipt
 M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : C8764095AB

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Robin E Goche

Mailing Address 56010 Fairview Rd

City Coquille State OR Zip Code 97423-8715

FEC ID number of contributing federal political committee. **C**

Name of Employer Aquatic Resources, Inc. Occupation Office Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C8764118A

Amount of Each Receipt this Period
10.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4158.34**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : C8764118AB

Amount of Each Receipt this Period
10.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Robin E Goche

Mailing Address 56010 Fairview Rd

City Coquille State OR Zip Code 97423-8715

FEC ID number of contributing federal political committee. **C**

Name of Employer Aquatic Resources, Inc. Occupation Office Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 13 / 2014

Transaction ID : C8799668A

Amount of Each Receipt this Period
20.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

30.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4158.34

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : C8799668AB

Amount of Each Receipt this Period

20.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Kathryn L Hahn

Mailing Address **5195 Miramar St**

City **Eugene** State **OR** Zip Code **97405-3576**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Bi-Mart Corp** Occupation **Pharmacist**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
210.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 15 / 2014

Transaction ID : C8809936A

Amount of Each Receipt this Period

35.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4158.34

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : C8809936AB

Amount of Each Receipt this Period

35.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

35.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Dennis Hollenberg

Mailing Address 1496 W 24th Place

City Eugene State OR Zip Code 97405-1809

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Writer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
303.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C8764116A

Amount of Each Receipt this Period
23.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4158.34

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2014

Transaction ID : C8764116AB

Amount of Each Receipt this Period
23.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Charles Langford

Mailing Address 1640 NW Kings Blvd

City Corvallis State OR Zip Code 97330-1904

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2014

Transaction ID : C8764088A

Amount of Each Receipt this Period
15.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

38.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4158.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	4

Transaction ID : C8764088AB

Amount of Each Receipt this Period

1	5	.	0	0
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[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Terry Liittschwager

Mailing Address **90432 Fish Hatchery Rd**

City **Walterville** State **OR** Zip Code **97489-9603**

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

Transaction ID : C8764113A

Amount of Each Receipt this Period

2	0	.	0	0
---	---	---	---	---

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4158.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	4

Transaction ID : C8764113AB

Amount of Each Receipt this Period

2	0	.	0	0
---	---	---	---	---

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2	0	.	0	0
---	---	---	---	---

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Eve L Morey

Mailing Address 4689 Ivy St

City Springfield State OR Zip Code 97478-7629

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8799658A

Amount of Each Receipt this Period
20.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4158.34

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : C8799658AB

Amount of Each Receipt this Period
20.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Dennis Noe

Mailing Address PO Box 1014

City Winchester State OR Zip Code 97495-1014

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
460.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 13 / 2014

Transaction ID : C8799662A

Amount of Each Receipt this Period
35.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

55.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **4158.34**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : C8799662AB

Amount of Each Receipt this Period
 _____ **35.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Charles N Papazian

Mailing Address **3348 Plateau Rd**

City **Longmont** State **CO** Zip Code **80503-8801**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Brewers Association** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 07 / 2014

Transaction ID : C8799656A

Amount of Each Receipt this Period
 _____ **250.00**

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **4158.34**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : C8799656AB

Amount of Each Receipt this Period
 _____ **250.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ **250.00**

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
John S Reynolds

Mailing Address 2495 Mission Avenue

City Eugene State OR Zip Code 97403-1882

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C8764107A

Amount of Each Receipt this Period
10.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4158.34

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2014

Transaction ID : C8764107AB

Amount of Each Receipt this Period
10.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Joel Rubin

Mailing Address 2724 Blaine Dr

City Chevy Chase State MD Zip Code 20815-3042

FEC ID number of contributing federal political committee. **C**

Name of Employer CFM Strategic Communications Occupation VP Federal Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C8764128A

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

510.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4158.34

Date of Receipt
 M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : C8764128AB

Amount of Each Receipt this Period

500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Kenneth D Scott

Mailing Address **4955 Diane Rose Ln NE**

City **Scotts Mills** State **OR** Zip Code **97375-9667**

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
585.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 13 / 2014

Transaction ID : C8799660A

Amount of Each Receipt this Period

50.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4158.34

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : C8799660AB

Amount of Each Receipt this Period

50.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

50.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
James Trappe

Mailing Address 2165 NW Maser Place

City Corvallis State OR Zip Code 97330-2223

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **365.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2014

Transaction ID : C8764101A

Amount of Each Receipt this Period
15.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4158.34**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : C8764101AB

Amount of Each Receipt this Period
15.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
James Trappe

Mailing Address 2165 NW Maser Place

City Corvallis State OR Zip Code 97330-2223

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **365.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 13 / 2014

Transaction ID : C8799664A

Amount of Each Receipt this Period
35.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

50.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **4158.34**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : C8799664AB

Amount of Each Receipt this Period
 _____ **35.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Susan E Tucker

Mailing Address **32395 Beymer Rd.**

City **Eugene** State **OR** Zip Code **97405-9533**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Not Employed**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : C8764115A

Amount of Each Receipt this Period
 _____ **10.00**

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **4158.34**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : C8764115AB

Amount of Each Receipt this Period
 _____ **10.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ **10.00**

_____ **30953.00**

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Alaska Air Group PAC

Mailing Address **PO Box 68900**

City **Seattle** State **WA** Zip Code **98168-0900**

FEC ID number of contributing federal political committee. **C C00024349**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : C8811418

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
American Airlines PAC

Mailing Address **1101 17th St NW Ste 600**

City **Washington** State **DC** Zip Code **20036-4718**

FEC ID number of contributing federal political committee. **C C00107300**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : C8809777

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
American Airlines PAC

Mailing Address **1101 17th St NW Ste 600**

City **Washington** State **DC** Zip Code **20036-4718**

FEC ID number of contributing federal political committee. **C C00107300**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : C8811423

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. American Airlines PAC

Full Name (Last, First, Middle Initial)
American Airlines PAC

Mailing Address 1101 17th St NW
Ste 600

City Washington State DC Zip Code 20036-4718

FEC ID number of contributing federal political committee. **C** C00107300

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : C8811419

Amount of Each Receipt this Period
1000.00

B. American Forest Resource Council (PAC)

Full Name (Last, First, Middle Initial)
American Forest Resource Council (PAC)

Mailing Address 5100 SW MacAdam Ave
Ste 350

City Portland State OR Zip Code 97239-3877

FEC ID number of contributing federal political committee. **C** C00371336

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2750.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : C8779497

Amount of Each Receipt this Period
2500.00

C. American Motorcyclist Political Action Committee

Full Name (Last, First, Middle Initial)
American Motorcyclist Political Action Committee

Mailing Address 13515 Yarmouth Dr

City Pickerington State OH Zip Code 43147-8214

FEC ID number of contributing federal political committee. **C** C00120238

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : C8809889

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) Bechtel PAC		Date of Receipt M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 50 Beale St		Transaction ID : C8806600
City San Francisco	State CA	
FEC ID number of contributing federal political committee. C C00103697		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Continental Airlines Inc Employee Fund		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 1600 Smith St Ste HQSGV		Transaction ID : C8811420
City Houston	State TX	
FEC ID number of contributing federal political committee. C C00101766		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) Delta Air Lines PAC		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 1212 New York Ave NW Ste 200		Transaction ID : C8811421
City Washington	State DC	
FEC ID number of contributing federal political committee. C C00104802		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
JStreetPAC

Mailing Address **PO Box 33106**

City **Washington** State **DC** Zip Code **20033-0106**

FEC ID number of contributing federal political committee. **C C00441949**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 07 / 2014

Transaction ID : C8765130

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Kirkpatrick & Lockhart Preston Gates Ellis LLP Political Action Committee (DC)

Mailing Address **1601 K St NW**

City **Washington** State **DC** Zip Code **20006-1682**

FEC ID number of contributing federal political committee. **C C00213173**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3075.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 11 / 2014

Transaction ID : C8863245

Amount of Each Receipt this Period
75.00

* In-Kind: in-kind contribution for event

C. Full Name (Last, First, Middle Initial)
Kirkpatrick & Lockhart Preston Gates Ellis LLP Political Action Committee (DC)

Mailing Address **1601 K St NW**

City **Washington** State **DC** Zip Code **20006-1682**

FEC ID number of contributing federal political committee. **C C00213173**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3075.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : C8809891

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3075.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Lone Rock PAC

Mailing Address **PO Box 1127**

City **Roseburg** State **OR** Zip Code **97470-0255**

FEC ID number of contributing federal political committee. **C C00126789**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : C8810889

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)
National Education Association

Mailing Address **1201 16th St NW Ste 420**

City **Washington** State **DC** Zip Code **20036-3201**

FEC ID number of contributing federal political committee. **C C70000492**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
04 / 07 / 2014

Transaction ID : C8765128

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Southwest Airlines Co. Freedom Fund PAC

Mailing Address **PO Box 36611**

City **Dallas** State **TX** Zip Code **75235-1611**

FEC ID number of contributing federal political committee. **C C00341602**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : C8811422

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Unite Here Tip Campaign Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address 275 7th Ave
 FI 10
 City State Zip Code
 New York NY 10001-6756
 FEC ID number of contributing federal political committee. **C** C00004861
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : C8764007
 Amount of Each Receipt this Period
 5000.00

B. Van Ness Feldman PC PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1050 Thomas Jefferson St NW
 City State Zip Code
 Washington DC 20007-3837
 FEC ID number of contributing federal political committee. **C** C00205369
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2014
Transaction ID : C8809778
 Amount of Each Receipt this Period
 1000.00

C. Weyerhaeuser Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 9777
 CH 3D21
 City State Zip Code
 Federal Way WA 98063-9777
 FEC ID number of contributing federal political committee. **C** C00007948
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : C8779511
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

7000.00
 27575.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DeFazio for Congress

A. Full Name (Last, First, Middle Initial)
Total Wine and More

Mailing Address 6240 Little River Tpke

City Alexandria State VA Zip Code 22312-1714

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2014

Transaction ID : C8809764

Amount of Each Receipt this Period
 280.96

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

280.96

280.96

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) SELCO Credit Union			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2014
Mailing Address PO Box 7487			Transaction ID : C8810857
City Eugene	State OR	Zip Code 97401-0487	
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 86.48
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 934.76		

Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	86.48
TOTAL This Period (last page this line number only).....	86.48

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. ACTBLUE Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 93.71
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement processing fee expense	Transaction ID : D608788
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ACTBLUE Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 10.91
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement processing fee expense	Transaction ID : D611168
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ACTBLUE Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 19.52
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement processing fee expense	Transaction ID : D612020
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	124.14
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. ACTBLUE Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 40.48 Transaction ID : D611377
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement processing fee expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Alaska Air		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 19300 International Blvd		Amount of Each Disbursement this Period 226.00 Transaction ID : D611169
City Seatac	State WA	
Zip Code 98188-5304	Purpose of Disbursement travel expense	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 283 Valley River Center		Amount of Each Disbursement this Period 76.56 Transaction ID : D611562
City Eugene	State OR	
Zip Code 97401-2176	Purpose of Disbursement cell phone expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	343.04
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2014
Mailing Address 3300 Gateway St		Amount of Each Disbursement this Period 329.00 Transaction ID : D611847
City Springfield	State OR	
Zip Code 97477-1054	Purpose of Disbursement computer expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 3300 Gateway St		Amount of Each Disbursement this Period 185.90 Transaction ID : D611167
City Springfield	State OR	
Zip Code 97477-1054	Purpose of Disbursement computer supplies expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Blumenauer for Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address PO Box 1396		Amount of Each Disbursement this Period 620.00 Transaction ID : D611164
City Portland	State OR	
Zip Code 97207-1396	Purpose of Disbursement visibility event expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1134.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Cardinal Services, INC		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 405 Lincoln St		Amount of Each Disbursement this Period 39.50 Transaction ID : D611173
City Eugene	State OR Zip Code 97401-2516	
Purpose of Disbursement bookkeeping services expense	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Cardinal Services, INC		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 405 Lincoln St		Amount of Each Disbursement this Period 39.50 Transaction ID : D611848
City Eugene	State OR Zip Code 97401-2516	
Purpose of Disbursement bookkeeping services expense	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Adrienne M Colaizzi		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 2433 Portland St		Amount of Each Disbursement this Period 620.81 Transaction ID : D611849
City Eugene	State OR Zip Code 97405-3124	
Purpose of Disbursement payroll: April '14	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	699.81
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Adrienne M Colaizzi		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 2433 Portland St		Amount of Each Disbursement this Period 572.36 Transaction ID : D611193
City Eugene	State OR Zip Code 97405-3124	
Purpose of Disbursement payroll: April '14	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address PO Box 34744		Amount of Each Disbursement this Period 242.35 Transaction ID : D611165
City Seattle	State WA Zip Code 98124-1744	
Purpose of Disbursement telecommunications expense	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Complete Campaigns.com, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address (A division of Aristotle Int.) 205 Pennsylvania Ave., SE		Amount of Each Disbursement this Period 345.00 Transaction ID : D611186
City Washington	State DC Zip Code 20003	
Purpose of Disbursement computer expense	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1159.71
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 54		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. EWEB		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 500 E 4th Ave		Amount of Each Disbursement this Period 93.38
City Eugene	State OR Zip Code 97401-3167	
Purpose of Disbursement water and electric expense	Category/Type 001	Transaction ID : D611171
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Carly Gabrielson		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 1511 Elkay Dr		Amount of Each Disbursement this Period 1318.85
City Eugene	State OR Zip Code 97404-3070	
Purpose of Disbursement payroll: April '14	Category/Type 001	Transaction ID : D611192
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Carly Gabrielson		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 1511 Elkay Dr		Amount of Each Disbursement this Period 1939.67
City Eugene	State OR Zip Code 97404-3070	
Purpose of Disbursement payroll: April '14	Category/Type 001	Transaction ID : D611850
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3351.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address Department Of The Treasury		Amount of Each Disbursement this Period 672.96 Transaction ID : D611851
City Ogden State UT Zip Code 84201-0001	Purpose of Disbursement payroll tax expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address Department Of The Treasury		Amount of Each Disbursement this Period 651.48 Transaction ID : D611176
City Ogden State UT Zip Code 84201-0001	Purpose of Disbursement payroll tax expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Lane County Fair		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 796 W 13th Ave		Amount of Each Disbursement this Period 600.00 Transaction ID : D611187
City Eugene State OR Zip Code 97402-4010	Purpose of Disbursement visibility event expense Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1924.44
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Mandate Media		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1801 NE Multnomah St		Amount of Each Disbursement this Period 956.72 Transaction ID : D611175
City Portland	State OR	
Zip Code 97232-2113	Purpose of Disbursement web service expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Maple Investments		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 975 Oak St Ste 1050		Amount of Each Disbursement this Period 300.00 Transaction ID : D611174
City Eugene	State OR	
Zip Code 97401-3124	Purpose of Disbursement office rent expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Menus by Occasions Caterers		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 655 Taylor St NE		Amount of Each Disbursement this Period 472.49 Transaction ID : D611194
City Washington	State DC	
Zip Code 20017-2063	Purpose of Disbursement fund raising event expense	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	1729.21
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 101.25 Transaction ID : D611163
City Washington	State DC Zip Code 20003-4006	
Purpose of Disbursement fund raising expense: food		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 550.00 Transaction ID : D611195
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement computer expense		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 2175 West 11th		Amount of Each Disbursement this Period 181.98 Transaction ID : D611185
City Eugene	State OR Zip Code 97402	
Purpose of Disbursement office supplies expense		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	833.23
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Oregon Department of Revenue		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address PO Box 14800		Amount of Each Disbursement this Period 234.72
City Salem	State OR	
Zip Code 97309-0920	Purpose of Disbursement state payroll tax expense	Transaction ID : D611172
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Oregon Department of Revenue		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO Box 14800		Amount of Each Disbursement this Period 241.91
City Salem	State OR	
Zip Code 97309-0920	Purpose of Disbursement state payroll tax expense	Transaction ID : D611852
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Perkins Coie		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 1201 3rd Ave Ste 4800		Amount of Each Disbursement this Period 88.00
City Seattle	State WA	
Zip Code 98101-3266	Purpose of Disbursement legal services expense	Transaction ID : D611189
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	564.63
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Peter A. DeFazio		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address PO Box 1316		Amount of Each Disbursement this Period 128.95 Transaction ID : D611178
City Springfield	State OR	
Purpose of Disbursement reimbursement for travel		Category/ Type 002
Candidate Name Peter A. DeFazio	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OR	District:	

Full Name (Last, First, Middle Initial) B. Regence BlueCross BlueShield		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address PO Box 35022		Amount of Each Disbursement this Period 898.00 Transaction ID : D611360
City Seattle	State WA	
Purpose of Disbursement health insurance expense		Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) c. Shelley Rubino		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 801 Pennsylvania Ave NW Apt 1219		Amount of Each Disbursement this Period 69.69 Transaction ID : D612511
City Washington	State DC	
Purpose of Disbursement reimb: fundraising event expense		Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	1096.64
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Shelley Rubino		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 801 Pennsylvania Ave NW Apt 1219		Amount of Each Disbursement this Period 63.75 Transaction ID : D612512
City Washington State DC Zip Code 20004-2619	Purpose of Disbursement reimb: fundraising event expense 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Shelley Rubino		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 801 Pennsylvania Ave NW Apt 1219		Amount of Each Disbursement this Period 132.52 Transaction ID : D612513
City Washington State DC Zip Code 20004-2619	Purpose of Disbursement reimb: fundraising event expense 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Shelley Rubino		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 801 Pennsylvania Ave NW Apt 1219		Amount of Each Disbursement this Period 138.89 Transaction ID : D612514
City Washington State DC Zip Code 20004-2619	Purpose of Disbursement reimb: fundraising event expense 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	335.16
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Sanipac		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 1480 Glenwood Blvd		Amount of Each Disbursement this Period 40.90
City Springfield	State OR	
Zip Code 97477	Purpose of Disbursement garbage and recycling expense	Transaction ID : D611162
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Stor It All		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 550 E 8th Ave		Amount of Each Disbursement this Period 170.00
City Eugene	State OR	
Zip Code 97401-3344	Purpose of Disbursement storage rent expense	Transaction ID : D611161
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sunday Properties, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 625 Country Club Rd		Amount of Each Disbursement this Period 50.00
City Eugene	State OR	
Zip Code 97401-6007	Purpose of Disbursement storage rent expense	Transaction ID : D611188
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	260.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. The Frost Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 3701 Porter St NW		Amount of Each Disbursement this Period 5000.00 Transaction ID : D611191
City Washington	State DC Zip Code 20016-3103	
Purpose of Disbursement fund raising expense	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 233 S Wacker Dr		Amount of Each Disbursement this Period 237.00 Transaction ID : D611180
City Chicago	State IL Zip Code 60606-7147	
Purpose of Disbursement travel expense	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 233 S Wacker Dr		Amount of Each Disbursement this Period 237.00 Transaction ID : D611181
City Chicago	State IL Zip Code 60606-7147	
Purpose of Disbursement travel expense	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5474.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 233 S Wacker Dr		Amount of Each Disbursement this Period 645.00 Transaction ID : D611182
City Chicago State IL Zip Code 60606-7147	Purpose of Disbursement travel expense Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 233 S Wacker Dr		Amount of Each Disbursement this Period 645.00 Transaction ID : D611183
City Chicago State IL Zip Code 60606-7147	Purpose of Disbursement travel expense Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 760 A St		Amount of Each Disbursement this Period 196.00 Transaction ID : D611813
City Springfield State OR Zip Code 97477-0822	Purpose of Disbursement fund raising postage expense Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1486.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. W Seattle		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 1112 4th Ave		Amount of Each Disbursement this Period 686.00 Transaction ID : D611160
City Seattle	State WA	
Zip Code 98101-3004	Purpose of Disbursement reimbursement for travel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Peter A. DeFazio		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address PO Box 1316		Amount of Each Disbursement this Period 686.00 Transaction ID : D611179 [MEMO ITEM]
City Springfield	State OR	
Zip Code 97477-0152	Purpose of Disbursement reimbursement for travel	Category/ Type 002
Candidate Name Peter A. DeFazio	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OR District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	686.00
TOTAL This Period (last page this line number only).....	21203.71

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 54			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Gila River Indian Community		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address PO Box 2160		Amount of Each Disbursement this Period 400.00 Transaction ID : D611190
City Sacaton	State AZ	
Zip Code 85147-0055	Purpose of Disbursement contribution refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	400.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 54			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DeFazio for Congress

Full Name (Last, First, Middle Initial) A. Democratic Party of Oregon		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 232 NE 9th Ave		Amount of Each Disbursement this Period 1000.00
City Portland State OR Zip Code 97232-2915	Purpose of Disbursement contribution 012 Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D611170
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00